

JANICE K. BREWER
Governor



WILLIAM BELL
Director

ARIZONA DEPARTMENT OF ADMINISTRATION

Benefit Services Division

100 N 15TH AVE, SUITE 103
PHOENIX, ARIZONA 85007
(602) 542-5008

NOTIFICATION OF COBRA RIGHTS

Dear Member:

This notification is to inform you of your rights to continued coverage under the Federal Law referred to as Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA).

The "qualifying event" that entitles you to COBRA is:

☐ Termination of Employment

☐ Reduction of hours

You will soon be receiving your COBRA Letter and Enrollment Form via US Mail from the Benefit Services Division. Upon termination or reduction of hours:

- Your active benefits will terminate the last day of the applicable pay period.
- Your decision to elect COBRA coverage must be made within 60 days of the date posted on your COBRA Notification Letter.
- You have 45 days from the date of your election to make your first payment retroactive back to the day after your active benefits end.
- Your benefits are only in effect once payment is received and posted by the vendor.
- You and all eligible dependents (covered on the plan on the date of the qualifying event) have individual rights to elect COBRA.
- Your COBRA coverage is offered for 18 months (if disabled within 60 days from your effective date of COBRA 29 months may be offered).

Your choices are: (1) to continue family or two-party coverage, if you had family or two-party coverage on the date of the qualifying event, (2) for one or more eligible dependents to elect single coverage, (3) decline COBRA coverage entirely.

Your COBRA continuation coverage may terminate early if (1) health coverage is no longer offered to any active employees, (2) you do not make the required payments in a timely manner, (3) you or any eligible dependents become covered under another group health plan that does not effectively limit coverage for any pre-existing condition, (4) you or your eligible dependents become entitled to Medicare, or (5) coverage was extended due to disability and the individual is determined to no longer be disabled.

If you have any questions regarding COBRA, please contact Samantha Roberts at 602-364-1301.

Sincerely,

Samantha Roberts
COBRA Analyst